

18  
11-6-00

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		9	10 900
FORMALITY REVIEW	MBS	863	11 2 00
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final	Original	Date
1	N	N	1/22/95
2	N	N	1/22/95
3	N	N	1/22/95
4	N	N	1/22/95
5	N	N	1/22/95
6	N	N	1/22/95
7	N	N	1/22/95
8	N	N	1/22/95
9	N	N	1/22/95
10	N	N	1/22/95
11	N	N	1/22/95
12	DN	N	1/22/95
13	DN	N	1/22/95
14	N	N	1/22/95
15	N	N	1/22/95
16	N	N	1/22/95
17	N	N	1/22/95
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If more than 150 claims or 10 actions  
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